

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

|              |       |             |
|--------------|-------|-------------|
| SERIAL NO.   | 19548 | FILING DATE |
| APPLICANT(S) |       |             |

CLAIMS

| AS FILED | AFTER<br>1st AMENDMENT |      | AFTER<br>2nd AMENDMENT |      |      |      |
|----------|------------------------|------|------------------------|------|------|------|
|          | IND.                   | DEP. | IND.                   | DEP. | IND. | DEP. |
| 1        |                        |      |                        |      |      |      |
| 2        |                        |      |                        |      |      |      |
| 3        |                        |      |                        |      |      |      |
| 4        |                        |      |                        |      |      |      |
| 5        |                        |      |                        |      |      |      |
| 6        |                        |      |                        |      |      |      |
| 7        |                        |      |                        |      |      |      |
| 8        |                        |      |                        |      |      |      |
| 9        |                        |      |                        |      |      |      |
| 10       |                        |      |                        |      |      |      |
| 11       |                        |      |                        |      |      |      |
| 12       |                        |      |                        |      |      |      |
| 13       |                        |      |                        |      |      |      |
| 14       |                        |      |                        |      |      |      |
| 15       |                        |      |                        |      |      |      |
| 16       |                        |      |                        |      |      |      |
| 17       |                        |      |                        |      |      |      |
| 18       |                        |      |                        |      |      |      |
| 19       |                        |      |                        |      |      |      |
| 20       |                        |      |                        |      |      |      |
| 21       |                        |      |                        |      |      |      |
| 22       |                        |      |                        |      |      |      |
| 23       |                        |      |                        |      |      |      |
| 24       |                        |      |                        |      |      |      |
| 25       |                        |      |                        |      |      |      |
| 26       |                        |      |                        |      |      |      |
| 27       |                        |      |                        |      |      |      |
| 28       |                        |      |                        |      |      |      |
| 29       |                        |      |                        |      |      |      |
| 30       |                        |      |                        |      |      |      |
| 31       |                        |      |                        |      |      |      |
| 32       |                        |      |                        |      |      |      |
| 33       |                        |      |                        |      |      |      |
| 34       |                        |      |                        |      |      |      |
| 35       |                        |      |                        |      |      |      |
| 36       |                        |      |                        |      |      |      |
| 37       |                        |      |                        |      |      |      |
| 38       |                        |      |                        |      |      |      |
| 39       |                        |      |                        |      |      |      |
| 40       |                        |      |                        |      |      |      |
| 41       |                        |      |                        |      |      |      |
| 42       |                        |      |                        |      |      |      |
| 43       |                        |      |                        |      |      |      |
| 44       |                        |      |                        |      |      |      |
| 45       |                        |      |                        |      |      |      |
| 46       |                        |      |                        |      |      |      |
| 47       |                        |      |                        |      |      |      |
| 48       |                        |      |                        |      |      |      |
| 49       |                        |      |                        |      |      |      |
| 50       |                        |      |                        |      |      |      |
| TAL ID:  |                        |      |                        |      |      |      |
| TAL EP:  |                        |      |                        |      |      |      |
| TAL NMB: |                        |      |                        |      |      |      |

| *            | *    | *    |      |      |      |
|--------------|------|------|------|------|------|
| IND.         | DEP. | IND. | DEP. | IND. | DEP. |
| 51           |      |      |      |      |      |
| 52           |      |      |      |      |      |
| 53           |      |      |      |      |      |
| 54           |      |      |      |      |      |
| 55           |      |      |      |      |      |
| 56           |      |      |      |      |      |
| 57           |      |      |      |      |      |
| 58           |      |      |      |      |      |
| 59           |      |      |      |      |      |
| 60           |      |      |      |      |      |
| 61           |      |      |      |      |      |
| 62           |      |      |      |      |      |
| 63           |      |      |      |      |      |
| 64           |      |      |      |      |      |
| 65           |      |      |      |      |      |
| 66           |      |      |      |      |      |
| 67           |      |      |      |      |      |
| 68           |      |      |      |      |      |
| 69           |      |      |      |      |      |
| 70           |      |      |      |      |      |
| 71           |      |      |      |      |      |
| 72           |      |      |      |      |      |
| 73           |      |      |      |      |      |
| 74           |      |      |      |      |      |
| 75           |      |      |      |      |      |
| 76           |      |      |      |      |      |
| 77           |      |      |      |      |      |
| 78           |      |      |      |      |      |
| 79           |      |      |      |      |      |
| 80           |      |      |      |      |      |
| 81           |      |      |      |      |      |
| 82           |      |      |      |      |      |
| 83           |      |      |      |      |      |
| 84           |      |      |      |      |      |
| 85           |      |      |      |      |      |
| 86           |      |      |      |      |      |
| 87           |      |      |      |      |      |
| 88           |      |      |      |      |      |
| 89           |      |      |      |      |      |
| 90           |      |      |      |      |      |
| 91           |      |      |      |      |      |
| 92           |      |      |      |      |      |
| 93           |      |      |      |      |      |
| 94           |      |      |      |      |      |
| 95           |      |      |      |      |      |
| 96           |      |      |      |      |      |
| 97           |      |      |      |      |      |
| 98           |      |      |      |      |      |
| 99           |      |      |      |      |      |
| 100          |      |      |      |      |      |
| TOTAL IND.   |      |      |      |      |      |
| TOTAL DEP.   |      |      |      |      |      |
| TOTAL CLAIMS |      |      |      |      |      |

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS